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Longridge Urban District Council



ANNUAL REPORTS

of the

Medical Officer of Health

and

Public Health Inspector

Year ended 31st December, 1961

LONGRIDGE URBAN DISTRICT COUNCIL

HEALTH DEPARTMENT PERSONNEL, 1961/1962

Chairman of the Council: Councillor Mrs. A. Smith

HEALTH AND HOUSING COMMITTEE

Chairman: Councillor J.G. Lund
Vice-Chairman: Councillor W.L. Houghton
Other Members: Councillors H. McLaughlin, W.H. Riding
and F. Singleton.

Medical Officer of Health: J. Walker, M.B., Ch.B., D.P.H., L.D.S.,
D.P.D. Also Divisional Medical Officer
to the Health Division No. 4 Lancashire
County Council and Medical Officer of
Health to the Adlington, Leyland,
Fulwood, Walton-le-Dale and Withnell
Urban District Councils, Chorley Borough
Council and Chorley and Preston Rural
District Councils.

Deputy Medical Officer of Health: N.T.W. Pover, L.R.C.S., L.R.F.P.S.,
L.M.S.S.A., D.P.H. Also Senior
Assistant Divisional Medical Officer.

Public Health Inspector: V.N. Page, M.R.S.H., M.A.P.H.I.
Also Cleansing Superintendent.



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Health Department,
LONGRIDGE.

Report of the Medical Officer of Health
for the year ended 31st December, 1961.

To the Chairman and Members of the Council
of the Urban District of Longridge.

I have pleasure in presenting the annual report of the health and sanitary circumstances of the Urban District of Longridge for the year ending 31st December, 1961. The health of the community depends on the conditions which are related to current economical and social circumstances. With changes in living standards new health problems arise and old problems lose their significance. By way of illustration, consider the changes which have taken place over the last 50 years.

At the commencement of the century life expectancy was 50 years for men and 53 for women; 55 years later the corresponding figures were 68 and 74. One third of these deaths were from infectious diseases; today the proportion is less than one-fifteenth.

Immediately before the second World War, the average annual number of deaths in England and Wales from scarlet fever was 298 and from diphtheria 2,700. In 1960 there were no deaths from scarlet fever and five from diphtheria. There were 2,383 deaths from whooping cough in 1941 compared with 37 in 1960.

In the past, the dangers to the health of the community were mainly from outbreaks of water-borne infectious diseases such as cholera and typhoid. These originated from insanitary conditions prevalent at the time. These diseases were replaced by those resulting from inadequate nutrition such as rickets which has almost disappeared since the advent of the Welfare State.

Today many of the illnesses which cause incapacity for work are associated with the stress of modern life. These illnesses include Peptic Ulcer, Coronary Thrombosis, Diabetes and a Variety of Neuroses.

Life is more complex today and the standard of living for most people is better than before. What then are the community problems of today? Many would seem to arise directly from the increased prosperity and an undue emphasis on the importance of materialistic values to the exclusion of all else.

Juvenile delinquency has almost trebled since 1913, and the five deaths from diphtheria in 1958 approximates the number of people killed by violence every three hours of the day and night in England and Wales. This increase in violence would appear to arise from a lack of discipline and self denial. The cry today is for more leisure. What is the use of the leisure if it cannot be properly applied? There are many instances where persons will carry out their normal work during the day and then take on extra jobs in their spare time. Such activity defeats the purpose of leisure which should be a change, bodily and mentally, from everyday work.

Food, clothing, shelter and a sense of security are important items in promoting health but it is a mistake to imagine that the Welfare State is the complete answer to every problem. Today more housewives than ever are going to work and whilst there is no doubt that in many cases this is a necessity, it cannot be denied that in other instances, the additional income is used in an attempt to "keep up with the Joneses"

Many authorities have stated that there are no harmful effects on the family when mother goes out to work. Others are of the opinion that sooner or later someone must suffer and where there are young children that 'someone' is the child. No substitute can replace the position of the mother in her home and no job can compete with the satisfaction of running a happy home. Children require security and affection in addition to material care.

The Pilkington Committee have reported on Television. In my opinion the great danger of television is its insidious ability to stifle individual thought and activity. The human brain has an inherent laziness. Most of us know how much easier it is to read a sensational novel rather than a difficult textbook. Once the initial effort has been made, the process of learning comes easier and just as an athlete can train his muscles to reach peak condition so can the brain be trained to reason and memorise. Vision is the easiest form of impression and while some television programmes are educational, there is no doubt that the majority are designed to stifle all individual constructive thought. These programmes have been defended on the grounds that they have public appeal - a sad reflection on the intellect of the public.

Turning now to the younger age group, there has been a similar change in the causes of mortality of the young people.

Infectious and respiratory diseases which were the main causes of infant deaths 50 years ago have been reduced and replaced by congenital and hereditary defects and various forms of heart disease. In adolescence, typhoid and tuberculosis have been replaced by accidents on the roads and at home. Accidents kill more children over one year old than any disease in Western Countries.

The main causes of accidents in the home are :-

1. Falls, chiefly among the elderly.
2. Poisoning.
3. Burns.
4. Suffocation, especially under 5 years of age. Many of these result from the use of plastic bags and bibs. Children often place their heads inside plastic bags when playing "Spacemen". What should be widely known is that plastic bags become adhesive when moist and may be inhaled causing them to adhere to the respiratory passages producing suffocation. Many accidents result from the use of electric fires in the bathroom. All fires should be guarded, mirrors should not be placed over fireplaces and medicines and household poisons should be kept under lock and key.

The national death rate from various forms of Cancer continues to rise; we do not know the reasons for the increase, some of which is undoubtedly due to better methods of diagnosis. Evidence is beginning to demonstrate a connection between smoking and lung cancer. Much has been said about failing to isolate carcinogenic substances from tobacco but I do not think this is the important point. What is more important is that some tobacco is bound to be inhaled. This smoke contains unburnt carbon particles which pass into the delicate linings of the lungs and produce irritation and changes in cell structure. It is known that prolonged irritation can produce cancer. In addition, there are other harmful effects of smoking which can produce Chronic Bronchitis, and arterial deficiency diseases. Lung cancer is most frequent in large towns; here atmospheric pollution may play an important part.

Coronary Thrombosis.

This may be regarded as the great epidemic disease of modern times. It has a special importance in that it often kills men at the height of their careers. The disease is more common among the overweight, sedentary, professional and executive classes. Many factors have been blamed, such as smoking, lack of exercise, obesity and foods rich in certain types of fats. The truth is that at present, we do not know the exact cause of this disease. Regular exercise and moderation in diet would appear to be the best way of reducing the incidence of Coronary Thrombosis.

Food Poisoning.

There are now a wide variety of processed foods available, prepared under excellent conditions in modern factories but they require intelligent handling and storage. Foods which do not require cooking can easily become contaminated and it is important to read the instructions on the labels of foods which have been processed or partly prepared as the directions are related to the amount and kind of treatment it has had and the storage it needs. Special care is required in Summer regarding the length of storage. Bacteria multiply more rapidly in warm weather and dangerous foods may appear wholesome to all intents and purposes. The most important preventative measure is handwashing before handling food; which should never be left in a warm kitchen or even to cool off slowly. It should be protected against flies which transmit bacteria from refuse and faecal matter. Wounds and sores should be protected by waterproof dressings.

Herds infected with Brucella organisms continue to make the supply of satisfactory milk a problem. These organisms are responsible for causing Undulant Fever which is characterised by prolonged periods of poor health resulting in the loss of much time off work. The illness can only be diagnosed with certainty by special tests. As these organisms are killed by heat treatment, it would be advisable for all raw milk to be pasteurised.

Problem Families.

Every community has long been aware of a hard core of families needing a disproportionate amount of care and supervision. They have been defined as families presenting an unusual amount of subnormal behaviour over long periods with a marked tendency to backsliding. One or both parents are often unstable or of low intelligence. Such families resist every effort at rehabilitation. The number in the country varies between one family per 1,000 and three per 1,000. The causes are uncertain; defects of character, intelligence and temperament combined with neglect and poor upbringing play an important part. The children are often reasonably well fed and the family may be happy and affectionate. All authorities agree that the break-up of such families should be prevented at all costs as the effects on the children of seeing their home broken up because of nonpayment of rent, can have serious repercussions in later years.

Regular meetings to prevent break-ups are held, at which Health Visitors, and representatives from the N.S.P.C.C., District Council, Welfare Services and National Assistance Board attend. Each case is discussed and every attempt is made to find a solution to keep the family unit intact. This is a National problem and without constant supervision, these families soon deteriorate. Any help given should stimulate not demoralise.

Tuberculosis.

There has been a decrease in the number of deaths from this disease. This is due to the introduction of new drugs and advances in chest surgery. However, the number of notifications remains high, due in some measure to the increased number of chest X-rays being taken for various purposes. The main problem today is the detection of the undiagnosed pool of chronic tuberculosis people who act as foci of infection. The scheme for B.C.G. vaccination of School-leavers is an important preventative measure. Briefly, the scheme involves a preliminary injection to determine which groups are susceptible to Tuberculosis. These groups are then offered further vaccination using attenuated vaccine.

Infectious diseases.

The immunisation figures for diphtheria continue to be disappointing, especially since the immunising agent used also provides immunity against tetanus and whooping cough. Once the immunity level of the population falls, diphtheria will return and there is no more serious illness. Whooping cough should also not be regarded lightly as it can produce serious defects of the lung. The conclusion is obvious. Immunisation to be complete must include protection against diphtheria, whooping cough, smallpox and tetanus, and not just those diseases which happen to be "headline news" at the time.

The Future.

The changes which take place in the health of the community are not dramatic. One has to look back 50 years to see the great changes which have occurred. Similarly, it is of interest to see what changes may take place in the future and to see what problems may have to be met.

Firstly, I think that the care of the aged will be a major problem. There are now over 3 million people aged 70 or more and by 1975 the number of persons of 65 years and over will increase by 2 million and will represent one seventh of the total population. Loneliness is one of the main problems. Many elderly persons require nursing and domestic help from the community.

The second problem will be that of the control of Radiation hazards. Apart from nuclear explosions, radioactive isotopes are used in Industry and medicine and hazards arise from exposure to ionising radiations outside the body and from ingestion or inhalation of substances which enter the body. These substances can produce changes in cell structure and if these changes involve the reproductive organs, these cell changes can be handed down to future generations. Radiation injury is the only known injury which can be transmitted to future generations. The Radio Active Substances Act received the Royal Assent in 1960 and requires, among other things, the registration of all premises where radioactive materials are kept and lays down measures for the disposal of radioactive waste.

The third problem is ^{that of} noise, Continual exposure can cause deterioration in hearing although it is always difficult to prove that a certain noise is prejudicial to health.

Turning now to matters "nearer home" it is of interest to note that the 1961 provisional census figure for the population of Longridge is 4,677, compared with the 1951 census figure of 4,308.

The number of live births registered during the year was 93 of which 51 were male and 42 female, an increase of 13 over 1960. There were 4 illegitimate births.

The birth rate is 19.8 (21.6 adjusted) as compared with 17.4 for England and Wales. There were two female still-births as against one last year.

The total number of deaths, 47, is a decrease of 7 over 1960. The death rate is 10 (11.4 adjusted) compared with the national figure of 12. Of these deaths, Heart disease, Vascular disease of the Nervous system, and Malignant disease were the most important causes. This compares with the National figures. There was a decrease of 6 deaths resulting from heart disease, an increase of 4 cases of death resulting from Vascular Diseases of the Nervous system and an increase of 2 cases of death from Malignant diseases. There were no deaths from Tuberculosis or from road or other accidents.

Infant Mortality.

There has been a steady decline in the Infant Mortality Rate from 138 at the beginning of the century to 21.4 in 1961. (These figures are for England and Wales). It differs from the general death rate in that it is related to a single age group, that of infants under 1 year, and is an important measure of the health of the community and its social environment. The main causes of death in the past were due to various types of infection. Although there has been such a great reduction in the deaths of children between 4 weeks and 12 months, there has not been the same reduction in infant deaths under 4 weeks of age. The main causes in this age group are Prematurity, and Congenital Malformations, i.e. those causes relating to birth and pregnancy which, in turn, are directly related to skilled Ante Natal and Obstetric Care.

There were 3 infant deaths under the age of 1 year, compared with one in 1960. The infant mortality rate is 32.3 (England and Wales 21.4).

Once again, there were no deaths relative to childbirth. This is a tribute to the medical and nursing care in this area.

Infectious Diseases.

79 cases of infectious diseases were notified in 1961. This represents an increase of 51 over the preceding year and is entirely due to an increase in Measles. There were no notifications of Tuberculosis.

It is debatable whether the number of notifications is accurate and there would appear to be grounds for revising some notifiable diseases. With the development of modern antibiotics, diseases such as scarlet fever, pneumonia and measles, to name but three, have lost their importance. It has been suggested that German Measles, Mumps and Chickenpox should be added to the list. There is no doubt that Rubella can be harmful to the foetus if contracted by the mother during pregnancy. Mumps can, in some cases, produce complications and the only danger with regard to chickenpox is that it can be confused with smallpox. Where the situation arises, chickenpox can be made notifiable.

Notification would best serve its purpose if it were limited to those diseases where practical preventative measures to protect the health of the community could be applied.

Milk Production.

Milk from two herds in Longridge and from three producers outside the district was found to be positive for Brucella organisms. The necessary action has been taken in each case.

In the attempt to control the introduction of infected animals into a herd arrangements are made for tests to be carried out on cows which have calved and newly purchased cows before they are admitted into the herd.

One child of $2\frac{1}{2}$ years was found to be suffering from Undulant Fever. The milk supplied had positive samples at an earlier date but it was not possible to prove that this was the source of infection in this case.

It was also reported that some pigs from an outside district had been found to be infected with Tuberculosis. These pigs had been fed with whey distributed from this district and it was thought that this whey had been the source of infection. Laboratory reports and samples of milk taken from dairy herds gave negative results.

Salmonella Menston.

This organism can cause food poisoning and was isolated from two carriers in the district. The source was traced to pigs on a farm. All the pigs were sent for slaughter and the premises disinfected.

The carriers were treated and allowed to return to work after three negative specimens were obtained from each.

In conclusion I would like to express my thanks and appreciation to Mr. Page, Public Health Inspector, and to the Officers and Staff for their co-operation and to the Chairman and Members for their continued support.

I have the honour to be,
Your obedient servant,

J. WALKER

Medical Officer of Health.

Physical Features of the Area

The physical and geological features of the area, which have been described in previous reports, remain substantially the same.

Statistics of the Area

Area in acres	3,285
Population (Census 1931)	4,158
Population (Census 1951)	4,308
Population (Census 1961) (Prov.)	4,677
Registrar General's estimate of Home Population (Mid 1961)	4,700
Number of inhabited houses (Census 1931)	1,067
Number of dwellings occupied and vacant (Census 1951)	1,336
Number of dwellings occupied (Census 1951)	1,306
Number of dwellings occupied and vacant (Ratebook 1961)	1,632
Number of dwellings occupied (Ratebook 1961)	1,581
Rateable Value 1961/62	£53,236
Sum represented by a penny rate 1961/62	£221

Social Conditions and Amenities of the District

There have been no changes worthy of comment in the social conditions and amenities of the area.

Vital Statistics

Births

Live Births

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	50	39	89
Illegitimate	1	3	4
	51	42	93

Birth Rate per 1,000 population 19.8

Stillbirths

Legitimate	-	2	2
Illegitimate	-	-	-
	-	2	2

Stillbirth rate per 1,000 live and stillbirths 41.2

Neo natal Mortality Rate 10.8

Table of Vital Statistics
Live Births, Deaths and Stillbirths

	Live Births		Deaths (All causes)		Stillbirths	
	No. Regis- tered	Rate per 1,000 Pop'n	No. Regis- tered	Rate per 1,000 Pop'n	No. Regis- tered	Rate per 1,000 Total Births
Year 1961	93	19.8	47	10.0	4	41.2
" 1960	80	17.3	54	11.7	1	12.5
" 1959	80	17.4	62	13.5	2	24.4
" 1958	94	20.6	47	10.3	1	10.5
" 1957	85	18.7	57	12.5	Nil	Nil
" 1956	76	16.8	43	9.5	5	62
Average 5 years 1956 to 1960	83	18.2	52.6	11.5	1.8	21.9

The birth and death rates shown in the previous and subsequent tables are known as "crude" rates. The Registrar General issues a comparability factor based on age and distribution of population which should be used when comparing the vital statistics of one area with another. The adjusted rates for this area are therefore as follows, allowing for a birth comparability factor of 1.09 and 1.14 for deaths.

Adjusted Birth Rate - 21.6 per 1,000 population

Adjusted Death Rate - 11.4 per 1,000 population

Table of Vital Statistics
Maternal and Infant Mortality

	Maternal Mortality		Infant Mortality Total under 1 year	
	No. of deaths Regis- tered	Rate per 1,000 Total Births	No. of deaths Regis- tered	Rate per 1,000 Live Births
Year 1961	Nil	Nil	3	32.3
" 1960	Nil	Nil	1	12.5
" 1959	Nil	Nil	4	50
" 1958	Nil	Nil	3	31.9
" 1957	Nil	Nil	1	12
" 1956	Nil	Nil	1	13
Average 5 years 1956 to 1960	Nil	Nil	2	24.5

Comparative Table of Vital Statistics for
Longridge, Lancashire, England & Wales

	Per 1,000 of Population		Maternal Mortality	Infant Mortality
	Live Birth Rate	Crude Death Rate	Per 1,000 Total live and Stillbirths	Per 1,000 Live Births
Longridge Average 5 years 1956 - 1960	18.2	11.5	Nil	24.5
1961	19.8	10	Nil	32.3
Lancashire 1961	17.4	13.3	0.38	24.1
England & Wales 1961	17.4	12.0	.33	21.4

Early Neo-Natal Mortality Rate

Deaths of infants under 1 week of age - 1
Mortality Rate per 1,000 live births - 10.8

Perinatal Mortality Rate

Stillbirths and Deaths under 1 week combined per 1,000 total live and stillbirths - 51.5

For the last three years detailed information on the deaths in very early childhood has been supplied by the Registrar General to show separate mortality rates for the early Neo-Natal state which cover the deaths of infants under one week of age and for the Perinatal Mortality rate which, in addition to the early Neo-Natal deaths, include the figure for stillbirths.

Further Analysis of Infant Mortality

	Neo-Natal (Under 4 weeks)		Early Neo-Natal (Under 1 week)		Perinatal (Under 1 week & Stillbirths)	
	No. of Deaths Registered	Rate per 1,000 Live Births	No. of Deaths Registered	Rate per 1,000 Live Births	No. Registered	Rate per 1,000 Live Births
Year 1961	1	10.8	1	10.8	5	51.5
" 1960	1	12.5	1	12.5	2	24.7
" 1959	3	37.5	2	25	4	48.8
" 1958	3	31.9	-	-	-	-
" 1957	1	12	-	-	-	-
" 1956	Nil	Nil	-	-	-	-
Average 5 years 1956 - 1960	4.6	18.7	-	-	-	-

<u>Analysis of Causes of Death</u>			
	Male	Female	Total
Tuberculosis (Respiratory)	-	-	-
Tuberculosis (Non-Respiratory)	-	-	-
Malignant Diseases	4	5	9
Leukaemia	1	-	1
Diabetes	-	-	-
Vascular Lesions of Nervous System	3	6	9
Heart Diseases	5	6	11
Other Circulatory Diseases	2	2	4
Influenza	1	1	2
Pneumonia	-	1	1
Bronchitis	3	-	3
Other Diseases of Respiratory System	-	-	-
Ulcer of Stomach and Duodenum	-	-	-
Gastritis, Enteritis and Diarrhoea	-	1	1
Nephritis and Nephrosis	-	-	-
Hyperplasia of Prostate	1	-	1
Congenital Malformations	-	-	-
Other Defined and Ill-Defined Diseases	2	3	5
Motor Vehicle Accidents	-	-	-
All Other Accidents	-	-	-
Other Infective and Parasitic Diseases	-	-	-
	22	25	47

Analysis of Causes of Death

Diseases of the heart were the largest single cause of death and numbered 6 less than in 1960.

Deaths from malignant diseases were 2 more than in the previous year. Vascular lesions of the nervous system caused four more deaths than in 1960.

Infant Mortality

There were three deaths of infants under one year and one in the previous year. This gives an infant mortality rate of 32.3 per 1,000 live births as compared with 12.5 in the previous year. The infant mortality rate for England and Wales as a whole is 21.4.

The cause of death of the three infants is given below.

Male	2 months	Acute septicaemia and pyaemia due to subphrenic abscesses due to operation under general anaesthetic.
Female	2 hours	Prematurity.
Female	2 months	Respiratory failure and toxæmia due to hæmorrhage. Broncho pneumonia.

TUBERCULOSIS

There were no new cases of Respiratory or Non-Respiratory Tuberculosis notified during the year.

There was no death attributable to Respiratory Tuberculosis.

One case of Non-Respiratory Tuberculosis was removed from the Register during the year.

The death rate per 1,000 of population from this disease is 0.00 for Respiratory and Non-Respiratory. The comparative figures for England and Wales are 0.065 and 0.007 respectively.

The number of people on the register at the end of the year under review is shown below.

<u>Respiratory</u>		<u>Non-Respiratory</u>	
<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
6	5	0	4
11		4	
		Totals	

Comparative Table of Tuberculosis Death Rates for Longridge, Lancashire, England and Wales

Per 1.000 of estimated population.			
	Death Rate from Respiratory Tuberculosis	Death Rate from Non-Respiratory Tuberculosis	Death Rate from all forms of Tuberculosis
Longridge Average 5 years 1956 - 1960	0.044	0.00	0.044
1960	0.00	0.00	0.00
1961	0.00	0.00	0.00
Lancashire 1961	0.06	0.01	0.07
England & Wales 1961	0.065	0.007	0.072

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

Laboratory Services

The laboratory service is directed by the Medical Research Council for the Ministry of Health and caters for every aspect of the public health work of a local authority relating to the bacteriological and pathological examinations of samples and specimens.

Hospital Accommodation

Infectious Diseases: Are normally admitted to the Deepdale Isolation Hospital. The number of infectious cases admitted to hospitals in 1961 was 4.

General Diseases: Three hospitals were available for patients in this district :-

- | | | |
|---|---|-----------------------------------|
| 1) Preston Royal Infirmary |) | Administered by the |
| 2) Sharoe Green Municipal Hospital, Preston) |) | Preston and Chorley |
| 3) St. Joseph's Hospital, Mount Street,
Preston (for private patients) |) | Hospital Management
Committee. |

Veneral Diseases: Clinics are held at the Preston Royal Infirmary. Advice and treatment are free and confidential.

National Assistance Act, 1948

It has not been necessary to recommend the removal to suitable premises of persons in need of care and attention as envisaged by Section 47 of the above Act.

It was not necessary to exercise the provisions of the National Assistance (Amendment) Act, 1951.

This Act gives local authorities further powers to enable them to deal expediently with certain cases of persons in need of care and attention which they are not receiving from other people. Where the Medical Officer of Health and another registered medical practitioner certify that, in the case of a person to whom Section 47 (1) of the National Assistance Act, 1948 applies, it is necessary in their opinion that he should be removed without delay from the premises in which he is residing, an application for a removal order may be made immediately to the appropriate magistrates. Any order made under these provisions is valid for a period not exceeding three weeks.

COUNTY COUNCIL HEALTH SERVICES IN THE AREA

There are a variety of Health Services of the Lancashire County Council operated in the area and which are under the control of the No. 4 Divisional Health Committee, 55, Victoria Road, Fulwood, Preston, telephone Preston 77263.

AMBULANCE SERVICE

The ambulance needs for Longridge are supplied by the service operated from Broughton House, Garstang Road, which deals with most of the area of Health Division No. 4 north of the Ribble, of which Longridge forms part. The ambulance vehicles are under radio control.

HOME NURSING AND MIDWIFERY SERVICE

A team of four nurses serve the Longridge and district area. The duties of these nurses include care of patients in their own homes, and they arrange for the loan of nursing equipment in suitable cases. Expectant mothers who are confined at home are also attended by them.

HOME HELP SERVICE

Home Helps are employed in Longridge and help a variety of cases including confinements, sickness, old age and infirmity and Tuberculosis cases. Night helps are also employed where needed.

CHILD WELFARE CENTRE

There is a weekly Child Welfare session held at the School Clinic, 26, Kestor Lane, Longridge, every Tuesday afternoon. A doctor and Health Visitor attend and give advice on infant care and management. Baby foods are also sold at the centre.

SCHOOL MEDICAL SERVICE

Medical and hygiene inspections are carried out at the school clinic, 26, Kestor Lane, Longridge. Clinic sessions are held for a variety of treatments including minor ailments, dental care and ophthalmic conditions. The County Council make special provisions for residential schooling for various categories of handicapped children such as the blind, partially sighted, deaf and dumb, epileptics, delicate and backward.

CONVALESCENT CARE

In suitable cases arrangements are made for the admission of patients to convalescent homes.

WELFARE SERVICE

Residential homes are provided to accommodate elderly and infirm persons who have no longer anyone to adequately care for them. Handicapped persons are also assisted.

The Welfare Officer in the Division is Mr. R. Roberts whose office is at 55, Victoria Road, Fulwood. Telephone Preston 77263.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE

The table below gives an analysis of notified cases.

	Scarlet Fever	Erysipelas	Measles	Dysentery	Whooping Cough
Under 1			1		
1 - 2			15		
3 - 4	1		18		1
5 - 9			36	1	
10 - 14			4		
15 - 24	1		1		
25 - 34					
35 - 44					
45 - 64					
65 & over					
Total cases all ages	2		75	1	1
Total deaths	Nil	Nil	Nil	Nil	Nil
Total cases removed to hospital	2	Nil	1	1	Nil

The total notifications of 79 cases of infectious disease compares with 28 cases in 1960.

It will be seen from the table above that the majority of notifications were in respect of Measles. There were 54 more cases of this disease than in the previous year.

No cases of Poliomyelitis were notified during the year.

Diphtheria was again absent from the district, the last notified case being in 1944.

In addition to the notifiable cases of infectious disease, one case of infective jaundice occurred in the district.

INSPECTION AND SUPERVISION OF FOOD

The problem associated with brucella organisms in milk referred to in last year's report is still exercising the minds of persons engaged in the production of disease free milk, and reference to the danger of consuming infected milk is made elsewhere in the report. Ninetythree individual cow samples from two herds were submitted for examination following positive results obtained of the presence of Brucella organisms in the bulk supply. In addition twentythree samples submitted for routine examinations were also examined for brucellosis.

REPORT ON MILK SAMPLES

The results of the samples of milk submitted for bacteriological examination and biological tests are shown below.

Test carried out	No. of samples taken	No. passed	No. failed	No result
Methylene Blue Reductase	17	11	Nil	6
Tubercle Bacillus	30	30	Nil	-
Brucella organisms - Ring test	116	103	13	-
Culture test	32	28	4	-

Dr. Gawne, the County Medical Officer of Health, supplied the following information of the results of food and drugs samples taken in Longridge during 1961.

A total of 25 samples were obtained, consisting of 15 milks and the following other items of food.

1 Self raising flour	1 Bread
1 Lard	1 Pork sausage
1 Coffee	1 Bacon
1 Baking powder	1 Curry powder
1 Butter	1 Minced meat

The samples were submitted for analysis to the County Analyst and with the exception of the undermentioned, all were reported to be genuine.

<u>Type of Sample</u>	<u>Result of Analysis</u>	<u>Action Taken</u>
1 Formal milk	Fat 2.90%, deficient 3.3% fat. Also low in solids-not-fat.	Vendor notified.

SMOKE ABATEMENT

Smoke pollution from industrial sources has improved with the use of mechanical stoking and better firing methods. In one large plant alterations have resulted in an improvement in the control of smoke; this has followed a survey conducted by N.F.E.S. Grit is still a cause of concern and it is hoped that some cutdown of this problem will occur in the near future.

No official action regarding the control of domestic appliances has yet been undertaken. Longridge is outside the areas considered to warrant immediate action.

MEAT

Only one licensed slaughterhouse has operated during the year. One slaughterhouse has ceased to exist.

Improvements including the provision of water bowls to the lairage have been carried out to the remaining slaughterhouse and the general conditions have been satisfactory.

The position regarding Tuberculosis in cattle is very pleasing, it is interesting to note that of the number of cattle inspected no case of Tuberculosis was found, this is the first year since the recommencement of slaughtering in Longridge that this situation has occurred.

During the year there were 95 cattle, 25 cows, 475 sheep and 26 pigs slaughtered and examined. No whole or part carcass was condemned for Tuberculosis. Fifteen cattle, 37 cows and 32 sheep had some part or organ condemned. It was not found necessary to carry out refrigeration treatment for the elimination of Cysticerci.

The arrangements of past years of condemned meat being voluntarily surrendered and dealt with at a specialist factory has again operated satisfactorily.

Approximately $17\frac{1}{2}$ lbs. of other foods were examined and condemned as being unfit for human consumption. This food was surrendered and disposed of by the Health Department.

FOOD HYGIENE REGULATIONS

During the routine visits made to food shops, it has become apparent that improvements are being made in the presentation, storage and sale of all foods, and the work of implementing the Food and Drugs Hygiene Regulations has become an easier task, though the problem is not so simple when dealing with the small house and shop lacking sufficient space; Improvements, however, are being effected in this sphere.

The improvement of the conditions relating to the mobile shop regarding hand-washing is being experienced with the use of purpose made equipment and today it is possible to meet a shop which shows a tremendous step forward in the hygienic methods of selling perishable items of food from a vehicle. Competition also plays its part in making a trader provide a mobile shop which is pleasant in appearance and gives shelter to the intended customer.

WATER SUPPLY.

The water supply to the Longridge area is the responsibility of the Preston and District Water Board and I am grateful to Mr. J. F. Bailoy, the Water Engineer and Manager, for supplying the statistics relating to the water supplied to Longridge. The supply continues to be an upland water source collected from Longridge Fell, water being piped from the Dilwerth reservoir situated above the township. The quality has been good and no complaints of tainting have been received. No restrictions were put on the use of water, the supply throughout the year being plentiful.

Chemical and bacteriological tests have as in the past been carried out at the laboratory situated in Chapel Brow, Longridge, where weekly tests and examinations are undertaken as a routine measure throughout the year.

In the case of the Longridge water supply, 13 bacteriological samples of treated water from taps on consumers' premises were taken and 36 samples from intakes and reservoirs. All the treated water samples proved satisfactory, four of the untreated waters were found to be unsatisfactory. One chemical analysis was carried out and was satisfactory.

The following is a chemical analysis of a sample of water taken in the Longridge district.

	<u>Parts per 1,000,000.</u>
Total solid Residue (Dried at 180°C.)	72.0
(in 15 mins.)	0.19
Oxygen required to oxidise (in 3 hours)	0.25
Ammonia - Free and Saline	0.026
Ammonia - Albuminoid	0.23
Nitrogen as Nitrates	0.40
Nitrogen as Nitrites	Nil.
Chlorides	14.0
Temporary Hardness	4.0
Permanent Hardness	40.0
Total Hardness	44.0
pH Value	7.5

Physical Properties - Colour 6 Hazen, Odourless.

Remarks: The quality of this water is satisfactory.

The following is a bacteriological examination taken from a Longridge tap.

Temperature of water at time of collection - 60°F.

Remarks: pH 7.6. Colour 6 Hazen.

Chlorine. Residual trace.

Organisms growing on Yeastrel Agar, per 1 m.l. of Water.

Cultivated for 3 days at 20° - 22°C	5
Cultivated for 2 days at 37°C	0

Coli-Aerogenes Bacteria.

Found in 0 m.l.

Not found in 100 m.l.

McCrary - No. per 100 m.l. 0

Sub-cultured to 44°C: Positive faecal B. Coli	0
Organisms of the I.A.C. Group	0

The results are satisfactory.

Supply to Houses.

There were 51 houses newly connected during the year, of these 35 being built for private ownership and 16 by the Local Authority.

At the end of the year the number of dwelling houses connected to the public mains was 1,510, serving an estimated population of 4,614. There are no houses in the district served by means of a standpipe.

General.

The water has no liability to plumbo-solvency and the analyses show that no contamination occurred during the year.

SANITARY ACCOMMODATION

The following comparative table shows the type of accommodation existing in dwelling houses.

Year	1955	1956	1957	1958	1959	1960	1961
Freshwater closets	1413	1473	1539	1569	1604	1685	1756
Waste water closets	165	152	130	118	105	98	87
Pail closets	77	76	76	76	76	76	65
Privy	17	17	17	17	17	17	16
Baths	817	871	898	924	950	1018	1080

PRIVATE STREET WORKS

Four new private street works were carried out in 1961.

Cross Street

Lee Street

Davis Street

Crumpax Avenue

SCHOOLS

The total number of schools in the district is six which are as follows :-

Longridge County Secondary School

Preston Road

County Primary and Junior School

Chapel Street

C.E. Junior School

Berry Lane

St. Wilfrid's R.C. School

St. Wilfrid's Terrace

Our Lady and St. Michael's R.C. School

Preston Road, Alston

Alston College of Further Education

Alston Lane

NEW SCHOOL

The construction of the new R.C. Secondary Modern School is proceeding and is programmed to be completed in the Autumn of 1962.

HOUSING

Nine families were rehoused into Council houses from 1 house in a Compulsory Purchase Area and 8 individually unfit houses. The demolition of the 32 houses already dealt with under the Housing Acts will be undertaken on the Council completing the acquisition of the houses and land.

The following table shows the number of new houses completed during the year.

	<u>Houses</u>	<u>Flats</u>
By the Local Authority	None	16
By other Local Authorities	None	None
Other bodies or persons	35	None

1. Inspection of dwelling houses during the year :-

(1) (a)	Total no. of dwelling houses inspected . formally or informally for housing defects (under Public Health or Housing Acts)	149
(b)	No. of inspections, formal or informal, made for the purpose	136
(2)	Dwelling houses unfit for human habitation and not capable at reasonable expense of being rendered fit	22
(3)	No. of dwelling houses found during the year to be not in all respects reasonably fit for human habitation but capable of being rendered fit	14

2. Houses Demolished :-

In Clearance Areas - (Housing Act, 1957 and Housing Repairs and Rents Act, 1954) :

	<u>Houses Demolished</u>	<u>Displaced during year</u>	
		<u>Persons</u>	<u>Families</u>
(1)	Houses unfit for human habitation	Nil	Nil
(2)	Houses included by reason of bad arrangement etc.	Nil	Nil
(3)	Houses on land acquired under Section 43(2) Housing Act, 1957	2	1

Not in Clearance Areas:

(4)	As a result of formal or informal procedure under Section 17(1) Housing Act, 1957.	Nil	11	8
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3. Unfit Houses Closed :-

	<u>Number</u>		
(1)	Under Section 16(4), 17(1) and 35(1) Housing Act, 1957	Nil	Nil
(2)	Under Sections 17(3) and 26 Housing Act, 1957	Nil	Nil
(3)	Parts of buildings closed under Section 18, Housing Act, 1957	Nil	Nil

4. Unfit Houses Made Fit and Houses in which Defects were Remedied :-

	<u>By Owner</u>	<u>By Local Authority</u>
(1) After informal action by local authority	21	-
(2) After formal notice under (a) Public Health Acts	Nil	Nil
(3) Under Section 24 Housing Act, 1957	Nil	-

5. Unfit Houses in Temporary Use (Housing Act, 1957) :-

	<u>Number of Houses</u>	<u>Number of separate dwellings contained in column (1)</u>
	(1)	(2)
Position at end of year:		
(1) Retained for temporary accommodation -		
(a) Under Section 48	1	1
(b) Under Section 17(2)	4	4
(c) Under Section 46	Nil	Nil
(2) Licensed for temporary occupation under Sections 34 or 53	Nil	-

6. Purchase of Houses by Agreement :-

	<u>Number of occupants of houses in col. (1)</u>
	(2)
Houses in Clearance Areas other than those included in confirmed Clearance Orders or Compulsory Purchase Orders, purchased during the year	Nil

Housing Act, 1949 - Improvement grants, etc -

Action during year:	<u>Private bodies or individuals.</u>		<u>Local authority.</u>	
	<u>No. of schemes</u>	<u>No. of dwelling houses or other buildings affected</u>	<u>No. of schemes</u>	<u>No. of dwelling houses or other bldgs. affected</u>
(a) Submitted by private individuals to local authority	-	-	-	-
(b) Approved by local authority	-	-	-	-
(c) Submitted by local authority to Ministry	-	-	-	-
(d) Finally approved by Ministry	-	-	-	-
(e) Work completed	-	-	-	-
(f) Additional separate dwellings included in (e) above	-	-	-	-

House Purchase and Housing Act, 1959 - Standard grants :-

Action during year:	<u>No. of dwellinghouses or other bldgs. affected.</u>
(a) Applications submitted to local authority	19
(b) Applications approved by local authority	18
(c) Work completed	18

RENT ACT, 1957.

It was not found necessary to invoke statutory action under this Act. No Certificates of Disrepair were granted during the year.

The following tables show the administration of the Factories Act, 1937, within the district.

Type of Factory	No. on Register	Inspections	Number of Written Notices	Occupiers Prosecuted
Non-Mechanical	3	9	-	-
Mechanical	42	25	-	-
Building sites	7	14	-	-
Total	52	48	-	-

	Defects		Cases referred		No. of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Insp.	By H.M. Insp.	
Want of cleanliness	7	7	Nil	Nil	Nil
Overcrowding	Nil	Nil	Nil	Nil	Nil
Unreasonable temperature	Nil	Nil	Nil	Nil	Nil
Inadequate ventilation	Nil	Nil	Nil	Nil	Nil
Ineffective drainage of floors	Nil	Nil	Nil	Nil	Nil
Sanitary Conveniences					
(a) Insufficient	1	1	Nil	Nil	Nil
(b) Unsuitable or defective	9	7	Nil	Nil	Nil
(c) Not separate sexes	Nil	Nil	Nil	Nil	Nil
	17	15	Nil	Nil	Nil

Part VIII of the Act - Outwork

Nature of work	Section 110				Section 111	
	No. out-workers In Aug. list reqd. by section 110(1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in unwholesome premises (5)	Notices served (6)	Prosecutions (7)
Gold Thread Embroidery	1	-	-	-	-	-

New Legislation, 1961

Below are appended some of the new Acts or Regulations which were passed or came into operation during 1961, and are applicable to this authority.

Factories Act, 1961 (1/4/62)
Highways (Miscellaneous Provisions) Act, 1961
Home Safety Act, 1961
Housing Act, 1961
Land Compensation Act, 1961
Land Drainage Act, 1961
National Health Service Act, 1961
Private Street Works Act, 1961
Public Health Act, 1961
Rating and Valuation Act, 1961
Rivers (Prevention of Pollution) Act, 1961
Rural Water Supplies and Sewerage Act, 1961
Authorised Officers (Meat Inspection) Regulations, 1961
Slaughter of Animals (Prevention of Cruelty) Regulations
(Appointed Day) Orders, 1961 (No. 4 Order 1/1/62)
Slaughterhouses (Hygiene) Regulations (Appointed Day) Orders, 1961
(No. 4 Order 1/1/62)
The Lead in Food Regulations, 1961 (16/4/62)
Milk (Special Designations) (Specified Areas) Order, 1961
Public Health (Aircraft) (Amendment) Regulations, 1961
The Alkali, &c. Works Order, 1961 (1/1/62)
Rag Flock and Other Filling Materials Regulations, 1961

Health Department,
Berry Lane,
Longridge.

The Public Health Inspector's Report
for the year ended December, 1961.

Mrs. Smith and Gentlemen,

It gives me much pleasure in submitting my fourteenth annual report on the work carried out in the Longridge area.

By tabulation, the body of the report endeavours to give a picture of the general activities of the department.

The routine work though less spectacular does require a considerable amount of time spent on revisits and following up.

Improvements are constantly being made in various fields, the general standard of living conditions are noticeably improving.

Standard grants are enabling persons to create very nice homes in houses that would be considered years ago so substandard that slum clearance action was the only way to deal with them.

Retail food shops and food preparation premises are also improving in their methods, no doubt the national advertising campaigns and the use of the better-type materials that are available are helping to play their part in encouraging the shopkeepers to display their wares to the best advantage.

The number of complaints which were received due to the condition of the older property has fallen, this being partly due to action under the Housing Act.

The largest problem associated with housing improvements is that owners of tenanted houses find it difficult to find the necessary capital to carry out improvements to their property even with the assistance of the improvement grants. This difficulty will not be resolved until pressure can be applied by legislation to enforce this action.

DETAILS OF INSPECTIONS
DURING THE YEAR.

Ice Cream premises	10
Bakehouses, butchers' and greengrocers' shops	105
Drainage	179
Factories	48
Food inspections	121
Farms, dairies and milkshops	61
Inspections under the Housing Acts	162
Infectious diseases	22
Inspections under the Public Health Acts	123
Licensed premises	21
Moveable dwellings	12
Refuse collection and disposal	199
Rodent control	117
Schools	27
Shops	31
Slaughterhouses	128
Smoke observations	16
	<u>1382</u>

HOUSING

Eight families were housed from unfit houses during the year. The demolition of 32 houses previously dealt with under the Housing Acts will be carried out when ownership has been completed.

No applications for improvement grants were received under the Housing Act, 1949.

Nineteen applications were submitted for standard grants under the Housing Act, 1950, eighteen were approved and eighteen were completed during this period.

No application for a Certificate of Disrepair under the Rent Act, 1957, was received.

Twentyone houses were made fit and defects remedied informally, there being no occasion when formal action under the Public Health Act or Housing Act was necessary.

RODENT CONTROL

Complaints of rodent infestations are very little different than in previous years and no serious or major infestations of mice or rats were encountered.

The work continues to be carried out by the one part-time operator employed.

Present day methods and materials together with the free domestic treatment service given helps to curtail the number of infestations that occur.

Two six monthly treatments of the Council's sewage system were carried out and only in isolated cases were infestations found and these were dealt with as required.

Commercial premises and farms are treated when requested and charges made on a time and materials basis, no contracts being entered into.

The table below shows the work carried out for the twelve months ended 31st December, 1961.

	<u>Type of Property</u>		
	<u>Non-Agricultural</u>	<u>Agricultural</u>	
	<u>Dwelling Houses</u>	<u>All Other</u>	
(a) No. of properties in district	1494	355	67
(b) No. of properties inspected	182	64	56
(c) Total inspections carried out (including re-inspections)	250	102	72
(d) No. of properties inspected which were found to be infested by:			
Rats - major	-	-	-
minor	8	16	5
Mice - major	-	-	-
minor	12	13	-
(e) No. of infested properties treated	12	21	5
(f) Total treatments carried out (including re-treatments)	16	28	8
(g) No. of "Block" control schemes carried out	-	-	-

DRAINAGE

With the large increase of private development in the area the amount of drainage work requiring supervision has increased considerably.

Because of lack of accommodation in the foul sewer it has become imperative that all top water does not gain access to the sewers. This problem is sometimes aggravated by the fact that top water drains are not always readily available, but only by adopting the principal of a separate system will further development be able to be maintained.

The conversion of waste water closets have been carried out at a slower rate and consideration of a more forceful action to clear the remaining closets will soon have to be contemplated.

INFECTIOUS DISEASES

There has been no change in the methods employed in disinfecting premises required to be dealt with following outbreaks of infectious disease. Formalin vapour lamps are used for premises requiring treatment and household effects and library books are also treated with formalin.

If required, beds and bedding are destroyed by the Council workmen when a death has occurred.

INSPECTION OF MEAT AND OTHER FOODS

Ante and postmortem inspections were carried out at the slaughterhouses and some 621 animals were dealt with. The details of the condemnations are tabulated below.

The weight of meat voluntarily surrendered amounted to 434 lbs. This condemned meat is disposed of by being dispatched to a bonafide firm after suitable colouring agent has been applied.

The following are the details of the carcasses inspected and condemned in whole or part.

	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	95	25	None	475	26
Number inspected	95	25	None	475	26
<u>ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI</u>					
Whole carcase condemned	None	None	None	None	1
Carcase of which some part or organ was condemned	15	7	None	32	None
Percentage of the number inspected affected with diseases other than Tuberculosis and Cysticerci	15.8	28	None	6.7	3.8

	Cattle excluding cows	Cows	Calves	Sheep and Pigs	
<u>TUBERCULOSIS ONLY</u>					
Whole carcase condemned	None	None	None	None	None
Carcase of which some part or organ was condemned	None	None	None	None	None
Percentage of number inspected affected with Tuberculosis	None	None	None	None	None
<u>CYSTICERCOSIS -</u>					
Carcase of which some part or organ was condemned	None	None	None	None	None
Carcases submitted to treatment by refrigeration	None	None	None	None	None
Generalised & totally condemned	None	None	None	None	None

In addition 17lbs. 8 ozs. of other foods were found to be unsound and unfit for human consumption and in all cases were voluntarily surrendered by the shopkeepers.

FOOD AND DRUGS ACT, 1938

The number of food premises registered, by type, under Section 14 of the Food and Drugs Acts or under Local Acts are shown below.

Type of business	No. Registered at 31. 12. 61.	No. of inspections of registered premises during the year
Butchers	4	51
Hawkers	1	2
Ice cream	20	22

The number of food premises, by type of business, in district, at end of year are shown below.

Grocers	16	Fried Fish Shops	3
Greengrocers	5	Sweets, Minerals and Ice Cream	16
Meat Shops	7	Catering Establishments	22
Bakers and Confectioners	6	Others	1

PUBLIC CLEANSING

House and Trade Refuse Collection and Disposal

The weekly collection of refuse has been maintained throughout the year. Though there has been an increase in the number of houses to be cleared including a large school and some new commercial establishments, it has been possible to absorb this extra work by the use of a new and larger vehicle of the fore and aft tipping type.

The disposal of refuse has progressed satisfactorily at the Railway Quarry Tip. With the domestic and trade refuse from Fulwood U.D. the tip is catering for a population of 20,000. No problem has arisen with regard to covering material, there being large quantities of quarry waste available.

The character of refuse is changing over the years with the larger number of houses with gardens; the domestic refuse tends to become more bulky and presents handling problems not previously encountered.

No complaints have been made about the tip and little or no rodent infestations have occurred.

Regular dressing of the tip has been carried out and fly breeding has not occurred.

The removal of the existing quarry waste for road building has continued throughout the year, which will extend the life of the tip.

It is hoped that as the tip is completed, sections will be able to be converted into playing areas of which there is a shortage in the Longridge district.

SALVAGE.

The collection of waste paper has increased over last year, the amount per 1,000 population being 39 cwts. per month as against 38.

The habit of saving waste paper is well ingrained in the Longridge housewife and contributes in no small degree to saving money which is reflected in the rates paid by the ratepayers.

Difficulties are being experienced in disposing of all the grades of paper collected and authorities are at present restricted in the amounts they are able to dispatch to the Board Mills. It is hoped that the present situation is temporary and that it will be possible to further increase our collection and disposal of this paper.

The price paid by Thames Board Mills for waste paper has remained fairly steady and very little different to that paid the previous year.

Weight of Salvage Collected and Sold

	1960/61.				1961/62.			
	Tons	Cwts	Qrs.	Lbs	Tons	Cwts	Qrs	Lbs
Mixed paper	65	8	2	5	58	15	3	0
Newspaper	47	16	1	18	17	6	0	0
Fibreboard	22	7	2	0	34	9	3	0
Ferrous Metal	4	8	2	14	4	1	0	9
Non-Ferrous Metal	-	1	3	19	-	16	1	4
Textiles	2	10	2	9	5	8	0	11
	112	13	2	9	120	16	3	24

Value of Salvage Sold

	1960/61.			1961/62.		
	£	s.	d.	£	s.	d.
Mixed paper	498	1	7	470	6	0
Newspaper	151	9	3	147	1	0
Fibreboard	212	11	2	352	19	9
Ferrous metal	28	14	8	32	6	4
Non-Ferrous metal	7	0	8	73	4	9
Textiles	30	3	4	67	6	5
	£928	0	8	£1,143	4	3

The table below gives the yield of waste paper per 1,000 of population for the past ten years.

Weight per 1,000 population per month

	<u>Cwts.</u>
1952	24.2
1953	34.0
1954	31.0
1955	38.4
1956	35.6
1957	34.6
1958	39.0
1959	36.5
1960	38.0
1961	39.0

The following is a summary of the collection and disposal of refuse and salvage during the financial year ended 31st March, 1962, together with figures for the preceding financial years ended 31st March, 1960 and 1961 and other figures of yield and disposal for comparison.

Estimated weight of refuse and salvage collected

	1959/60				1960/61				1961/62			
	T.	c.	q.	lbs.	T.	c.	q.	lbs.	T.	c.	q.	lbs.
House and Trade Refuse	927	5	0	0	948	10	0	0	1000	2	0	0
Salvage	106	6	3	10	112	13	2	9	120	16	3	24
	1033	11	3	10	1061	3	2	9	1120	18	3	24

Cost of Collection and Disposal

	1958/59	1959/60	1960/61	1961/62
	£	£	£	£
Refuse Collection	1,554	1,649	1,760	1,862
Motor Transport	906	1,049	1,174	1,321
Longridge contribution to tip maintenance	175	273	275	216
Salvage - Baling and Bonuses	668	576	529	593
	3,303	3,547	3,738	3,992
Less Income :-				
Trade Refuse	6	2	-	10
Salvage Sales	1,032	907	928	1,062
	2,265	2,638	2,810	2,920

Gross income from salvage for the past ten years.

	Tons	Cwts	Qrs	Lbs	£	s.	d.
1952	74	19	0	14	710	1	0
1953	96	9	1	10	776	14	3
1954	87	14	3	4	746	5	2
1955	116	5	0	23	1119	14	5
1956	108	15	0	10	975	9	5
1957	105	18	3	14	925	5	2
1958	117	4	3	5	1006	19	10
1959	106	6	3	10	907	8	8
1960	112	13	2	9	928	0	8
1961	120	16	3	24	1143	4	3
	1047	4	2	11	9239	2	10

CONCLUSION

May I tender my thanks and appreciation to the Chairman and Members of the Council for their interest and support.

My thanks are also due to my fellow officers and staff for their co-operation and I express my appreciation to Dr. Walker for his guidance and support.

I am, Mrs. Smith and Gentlemen,
Yours obediently,

V.N. PAGE

Public Health Inspector.

